

**CONTINUATION SHEET FOR QUESTIONNAIRES**  
**SF 86, SF 85P, AND SF 85**

For use with the SF 86, Questionnaire for National Security Positions;  
 SF 85P, Questionnaire for Public Trust Positions; and  
 SF 85, Questionnaire for Non-Sensitive Positions

**INSTRUCTIONS:** Use this form to continue your answers to "Where You Have Lived," "Where You Went to School," and/or "Your Employment Activities." Follow the instructions on the form for the particular questions you are answering and give information in the same sequence. Use as many continuation sheets as needed.

<b>Your Name</b>	<b>Your Social Security Number</b>
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**WHERE YOU HAVE LIVED (Continued)**

<b>#1</b>	Month/Year To	Month/Year	Street Address	Apt. #	City (Country)	State	ZIP Code
			Name of Person Who Knew You	Apt. #	City (Country)	State	ZIP Code
( )							
<b>#2</b>	Month/Year To	Month/Year	Street Address	Apt. #	City (Country)	State	ZIP Code
			Name of Person Who Knew You	Apt. #	City (Country)	State	ZIP Code
( )							
<b>#3</b>	Month/Year To	Month/Year	Street Address	Apt. #	City (Country)	State	ZIP Code
			Name of Person Who Knew You	Apt. #	City (Country)	State	ZIP Code
( )							
<b>#4</b>	Month/Year To	Month/Year	Street Address	Apt. #	City (Country)	State	ZIP Code
			Name of Person Who Knew You	Apt. #	City (Country)	State	ZIP Code
( )							
<b>#5</b>	Month/Year To	Month/Year	Street Address	Apt. #	City (Country)	State	ZIP Code
			Name of Person Who Knew You	Apt. #	City (Country)	State	ZIP Code
( )							

**WHERE YOU WENT TO SCHOOL (Continued)**

<b>#1</b>	Month/Year To	Month/Year	Code	Name of School	Degree/Diploma/Other	Month/Year Awarded	
Street Address and City (Country) of School							
						State	
						ZIP Code	
			Name of Person Who Knew You	Apt. #	City (Country)	State	
			Street Address	Apt. #	City (Country)	State	
			Apt. #	City (Country)	State	ZIP Code	
( )							
<b>#2</b>	Month/Year To	Month/Year	Code	Name of School	Degree/Diploma/Other	Month/Year Awarded	
Street Address and City (Country) of School							
						State	
						ZIP Code	
			Name of Person Who Knew You	Apt. #	City (Country)	State	
			Street Address	Apt. #	City (Country)	State	
			Apt. #	City (Country)	State	ZIP Code	
( )							
<b>#3</b>	Month/Year To	Month/Year	Code	Name of School	Degree/Diploma/Other	Month/Year Awarded	
Street Address and City (Country) of School							
						State	
						ZIP Code	
			Name of Person Who Knew You	Apt. #	City (Country)	State	
			Street Address	Apt. #	City (Country)	State	
			Apt. #	City (Country)	State	ZIP Code	
( )							

**YOUR EMPLOYMENT ACTIVITIES (Continued)**

Month/Year To	Month/Year	Code	Employer/Verifier Name/Military Duty Location	Your Position Title/Military Rank		
Employer's/Verifier's Street Address			City (Country)	State	ZIP Code	Telephone Number ( )
Street Address of Job Location (If different than Employer's Address)			City (Country)	State	ZIP Code	Telephone Number ( )
Supervisor's Name & Street Address (If different than Job Location)			City (Country)	State	ZIP Code	Telephone Number ( )
<b>PREVIOUS PERIODS OF ACTIVITY</b>	Month/Year To	Month/Year	Position Title	Supervisor		
	Month/Year To	Month/Year	Position Title	Supervisor		
	Month/Year To	Month/Year	Position Title	Supervisor		
Month/Year To	Month/Year	Code	Employer/Verifier Name/Military Duty Location	Your Position Title/Military Rank		
Employer's/Verifier's Street Address			City (Country)	State	ZIP Code	Telephone Number ( )
Street Address of Job Location (If different than Employer's Address)			City (Country)	State	ZIP Code	Telephone Number ( )
Supervisor's Name & Street Address (If different than Job Location)			City (Country)	State	ZIP Code	Telephone Number ( )
<b>PREVIOUS PERIODS OF ACTIVITY</b>	Month/Year To	Month/Year	Position Title	Supervisor		
	Month/Year To	Month/Year	Position Title	Supervisor		
	Month/Year To	Month/Year	Position Title	Supervisor		
Month/Year To	Month/Year	Code	Employer/Verifier Name/Military Duty Location	Your Position Title/Military Rank		
Employer's/Verifier's Street Address			City (Country)	State	ZIP Code	Telephone Number ( )
Street Address of Job Location (If different than Employer's Address)			City (Country)	State	ZIP Code	Telephone Number ( )
Supervisor's Name & Street Address (If different than Job Location)			City (Country)	State	ZIP Code	Telephone Number ( )
<b>PREVIOUS PERIODS OF ACTIVITY</b>	Month/Year To	Month/Year	Position Title	Supervisor		
	Month/Year To	Month/Year	Position Title	Supervisor		
	Month/Year To	Month/Year	Position Title	Supervisor		
Month/Year To	Month/Year	Code	Employer/Verifier Name/Military Duty Location	Your Position Title/Military Rank		
Employer's/Verifier's Street Address			City (Country)	State	ZIP Code	Telephone Number ( )
Street Address of Job Location (If different than Employer's Address)			City (Country)	State	ZIP Code	Telephone Number ( )
Supervisor's Name & Street Address (If different than Job Location)			City (Country)	State	ZIP Code	Telephone Number ( )
<b>PREVIOUS PERIODS OF ACTIVITY</b>	Month/Year To	Month/Year	Position Title	Supervisor		
	Month/Year To	Month/Year	Position Title	Supervisor		
	Month/Year To	Month/Year	Position Title	Supervisor		

Enter your Social Security Number before going to the next page